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## \*BIBDATASHEET\*

CONFIRMATION NO. 7066

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/853,409	<b>FILING OR 371(c) DATE</b> 05/11/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> ISPH-0569
<b>APPLICANTS</b> Kevin P. Anderson, Carlsbad, CA; Ronnie C. Hanecak, San Clemente, CA; Chikateru Nozaki, Kumanoto, JAPAN; F. Andrew Dorr, Solana Beach, CA; T. Jesse Kwoh, Carlsbad, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/690,936 10/18/2000 PAT 6,608,191 which is a CON of 08/988,321 12/10/1997 PAT 6,174,868 which is a CIP of 08/650,093 05/17/1996 PAT 6,391,542 which is a CIP of 08/452,841 05/30/1995 PAT 6,423,489 which is a CIP of 08/397,220 03/09/1995 PAT 6,284,458 which is a 371 of PCT/JP93/01293 09/10/1993 which is a CIP of 07/945,289 09/10/1992 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/12/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 18
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 34138				
<b>TITLE</b> COMPOSITIONS AND METHODS FOR TREATMENT OF HEPATITIS C VIRUS-ASSOCIATED DISEASES				
<b>FILING FEE RECEIVED</b> 1296	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	